U.S. Palent and Tracemark Office; U.S. DEPARTMENT OF COMMI

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control nu-PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 783 93 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) NUMBER FILED **FOR** NUMBER EXTRA RATE FEE RATE FE **BASIC FEE** (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = X \$ OR X \$_ = INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X \$ = X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) + \$ OR + \$ * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) **SMALL ENTITY** SMALL ENTITY CLAIMS HIGHEST **PRESENT** REMAINING NUMBER RATE ADDI-RATE ADD AMENDMENT **AFTER EXTRA PREVIOUSLY** TIONAL TION **PAID FOR AMENDMENT** FEE FEE Total (37 CFR 1.16(c)) Minus OR X \$ Independent Minus (37 CFR 1.16(b)) X \$ OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST മ **PRESENT** REMAINING NUMBER RATE ADDI-**RATE ADDI AMENDMENT AFTER PREVIOUSLY EXTRA** TIONAL TIONA **AMENDMENT** PAID FOR FEE FEE Total Minus = (37 CFR 1.16(c)) OR ... Independent Minus = X S OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE <u>-</u> -(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST **PRESENT** REMAINING NUMBER RATE ADDI-**ADDI** RATE AMENDMENT **EXTRA AFTER PREVIOUSLY** TIONAL TIONA **AMENDMENT** PAID FOR FEE FEE Total Minus

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

Minus

(37 CFR 1.16(c))

Independent

(37 CFR 1.16(b))

X \$_

X \$

TOTAL ADD'L FEE

=

OR

OR'

OR

OR

TOTAL

ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.